

REMARKS

Claim Amendments

Claims 1-8 have been canceled without prejudice or disclaimer. Applicants specifically reserve the right to file one or more appropriate divisional applications drawn to the subject matter of these canceled claims.

Claims 9 and 14 have been amended as independent claims by incorporating all the elements from their respective base claims.

New claims 24-34 have been added. Support for these new claims can be found, for example, in the original claims 2-8 and 10-13, respectively.

No new matter has been added by these amendments. The Examiner is hereby requested to enter these amendments.

Restriction Requirement:

In the Office Action, the Examiner required the following restriction under 35 U.S.C. § 121:

- I. Claims 1-8, drawn to a modified methionine aminopeptidase comprising at least one amino acid substitution at either or both of the amino acid positions 206 and 233 of SEQ ID NO:1, classified in class 435, subclass 220.
- II. Claims 9-16, drawn to a cell comprising a modified methionine aminopeptidase, to a DNA molecule comprising a nucleic acid sequence encoding a modified methionine aminopeptidase comprising at least one amino acid substitution at either or both of the amino acid positions 206 and 233 of SEQ ID NO:1, to an expression vector comprising same and to a host cell comprising same, classified, *inter alia*, in class 536, subclass 23.2.
- III. Claims 17-23, drawn to a method of removing an amino-terminal methionine from a protein by contacting the protein with a modified methionine aminopeptidase comprising at least one amino acid substitution at either or both of the amino acid positions 206 and 233 of SEQ ID NO:1, classified in class 435, subclass 681.

Applicant : You-Di Liao
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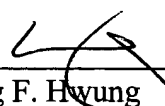
In response, Applicants elect Group II, claims 9-16, without traverse. Newly added claims 24-34 belong to this group as well.

Early examination of this application on the merits is earnestly solicited. In the event that a telephone conversation could expedite the prosecution of this application, the Examiner is requested to call the undersigned at (650) 839-5044.

Enclosed is a \$75.00 check for the excess claim fees. Please apply any other charges or credits to deposit account 06-1050.

Respectfully submitted,

Date: Oct. 7, 2005



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